Application Data Sheet

Application Information

Application Type:: Regular Subject Matter:: Utility

Title:: REPRESENTATION OF A DELETED

INTERPOLATION N-GRAM LANGUAGE

MODEL IN ARPA STANDARD FORMAT

Attorney Docket Number:: M61.12-0625

Request for Non-Publication?:: No
Suggested Drawing Figure:: 7
Total Drawing Sheets:: 7
Small Entity?:: No
Petition included?:: No

Petition Type::

Applicant Information

Applicant Authority Type:: Inventor Primary Citizenship Country:: Romania Given Name:: Ciprian Family Name:: Chelba

Name Suffix::

City of Residence:: Seattle

State or Province of Residence:: WA Country of Residence:: US

Street of Mailing address:: 1928 43rd Avenue E., Apt. #4

City of Mailing address:: Seattle State of Province of mailing address:: WA

Country of mailing address::

Postal or Zip Code:: 98112

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Given Name:: Mahajan Family Name:: Milind

Name Suffix::

City of Residence:: Redmond

State or Province of Residence:: WA Country of Residence:: US

Street of Mailing address:: 17430 NE 97th Way

City of Mailing address:: Redmond
State of Province of mailing address:: WA

Country of mailing address::

Postal or Zip Code:: 98052

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Spain

Given Name:: Alejandro

Family Name:: Acero

Name Suffix::

City of Residence:: Bellevue

State or Province of Residence:: WA Country of Residence:: US

Street of Mailing address:: 6525 163rd Place SE

City of Mailing address:: Bellevue
State of Province of mailing address:: WA

Country of mailing address::

Postal or Zip Code:: 98006

Correspondence Information

Name:: Theodore M. Magee

Street of mailing address:: Westman, Champlin & Kelly

900 Second Avenue South, Suite 1600

City	of r	mailing	ac	ddre	ess::	Minneapo]	lis
State	or	Provinc	ce	of	mailing	address::	MN

Postal or Zip Code of mailing address:: 55402-3319

Phone number::

612/334-3222

Fax number::

612/334-3212

E-Mail address::

tmagee@wck.com

Representative Information

Representative	Customer	Number::	27366

Domestic Priority Information

Application::	Continuity Type::	Parent	Parent Filing
		Application::	Date::
This application			MM/DD/YY

Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::
		MM/DD/YY	Yes or No

Assignee Information

Assignee name::

Microsoft Corporation

Street of mailing address::

One Microsoft Way

City of mailing address::

Redmond

State or Province of mailing address:: WA

Country of mailing address::

Postal or Zip Code of mailing address:: 98052